

Political Organization  
Notice of Section 527 Status

OMB No. 1545-1693

General Information

1 Name of organization <b>Goodin for State Representative Committee</b>		Employer identification number <b>35 2113367</b>
2 Mailing address (P.O. Box or number, street, and room or suite number) <b>409 Seymour Rd.</b>		
City or town, state, and ZIP code <b>Crothersville, IN 47229</b>		
3 E-mail address of organization <b>N/A</b>		
4a Name of custodian of records <b>Terry A. Goodin</b>	4b Custodian's address <b>409 Seymour Rd. Crothersville, IN 47229</b>	
5a Name of contact person <b>Terry A. Goodin</b>	5b Contact person's address <b>409 Seymour Rd Crothersville, IN 47229</b>	
6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number  City or town, state, and ZIP code		

Purpose

7 Describe the purpose of the organization

**Campaign Election Committee**

List of All Related Entities (see instructions)

8a Name of related entity	8b Relationship	8c Address

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